

**NEW CASTLE COUNTY REGISTER OF WILLS REQUEST  
FOR SMALL ESTATE AFFIDAVIT VIA MAIL**

**REQUIREMENTS:**

To be eligible for a small estate affidavit by mail:

1. The decedent must NOT solely own any real estate.
2. The decedent must have less than \$30,000 in assets (if date of death is since 2004. Please call 302-395-7800 for information about dates of death prior to 2004).
3. The requestor must be the named executor in the valid, self-proven, original will. If there is no valid will, the requestor must be the closest next of kin to the decedent (according to Delaware law).
4. The requestor must have a valid reason why they cannot obtain the affidavit in person.
5. The requestor cannot be a convicted felon.

NOTE: The affidavit cannot be notarized or used until 30 days from the date of death.

**INSTRUCTIONS:**

1. If there is a Will, include the original along with this request form. If the Will has been previously filed, please provide us with the ROW File # \_\_\_\_\_
2. Mail with a check payable to "Register of Wills" and mail to Register of Wills, 2<sup>nd</sup> Floor, 800 N. French Street, Wilmington, DE 19801
3. Mail with an original raised seal death certificate. Unfortunately, we cannot return the death certificate if it is being filed with an original will.
4. Include a copy of the front and back of the requestor's driver's license (or other acceptable photo ID with a signature).

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PLEASE COMPLETE ALL ITEMS BELOW:

1. Name of decedent: (must be a New Castle County resident) **PERSON WHO DIED** \_\_\_\_\_

2. Name of requestor: **PERSON ASKING FOR AFFIDAVIT** \_\_\_\_\_

3. Relationship between requestor and decedent: **WIFE, EXECUTOR, ETC.** \_\_\_\_\_  
(Must be the named executor or the closest next of kin if there is no will)

4. Address of requestor: **MAILING ADDRESS FOR REQUESTOR** \_\_\_\_\_

Email address: **JDOE@GMAIL.COM** Phone number: **(###) ###-####** \_\_\_\_\_

5. Is there a valid Will?  Yes  No **CHECK ONE** *If yes, mail the original Will to file in Register of Wills.*

6. Number of small estate affidavits requested: **INSERT NUMBER NEEDED** Amount enclosed: \$ **\$10 PLUS \$5 EACH ADDITIONAL AFFIDAVIT PLUS \$1 FOR POSTAGE=** \_\_\_\_\_  
*(\$10 for the first small estate affidavit, plus \$5 for each additional affidavit requested at the same time, plus \$1 for postage. Please make check payable to "Register of Wills").*

7. List each asset(s) separately and dollar amount of each asset(s), e.g. Wells Fargo bank checking account = \$500.00; Car = \$3000, etc : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. State reason the affidavit must be obtained through the mail instead of at the office:

**DISABLED, LIVE IN TEXAS, ETC.** \_\_\_\_\_

9. Has the requestor ever been convicted of a felony?  Yes  No **CHECK ONE**

Date \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_  
Requestor (signature)

**NOTE: Upon receipt of the affidavit, you must take it to a notary and sign the affidavit in front of the notary. Please note that an affidavit received by mail will NOT be able to be used until it is properly notarized and 30 days have passed since the date of death. Failure to fill out this form correctly or to supply all necessary materials will delay processing your request. If you have any questions, please call (302) 395-7800.**